

UNITED STATES DISTRICT COURT

for

District of Nebraska

FILED
U.S. DISTRICT COURT
DISTRICT OF NEBRASKA
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OFFICE OF THE CLERK

**Request for Modifying the Conditions or Term of Supervision
with Consent of the Offender**
(Probation Form 49, Waiver of Hearing is Attached)

Name of Offender: Cindy Waugh **Docket Number:** 8:90CR19
Sentencing Judge: The Honorable Lyle E. Strom
United States Senior District Judge
Date of Original Sentence: December 29, 2003
Original Offense: Possession with Intent to Distribute Methamphetamine
21 U.S.C. 841(a)(1)
Original Sentence: 175 months imprisonment; five years supervised release
Type of Supervision: Supervised Release
Date Supervision Commenced: December 30, 2004

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PETITIONING THE COURT

☐ To extend the term of supervision for _____, for a total term of _____.

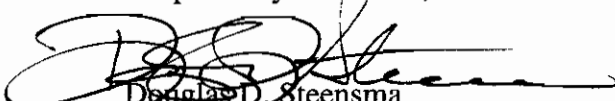
☒ To modify the conditions of supervision as follows:

The cost of the offender's supervision be remitted.


CAUSE

Ms. Waugh survives on a very limited income. In addition she suffers from numerous health problems. Her living expenses and limited income prevent her from being able to afford the costs of supervision at the current rate. As such, it is this officer's position that the supervision fees originally ordered by the Court be remitted.

Respectfully submitted,


Douglas D. Steensma
U.S. Probation Officer

Reviewed by,


John A. Hill, Supervising
U.S. Probation Officer

THE COURT ORDERS

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- ☐ No Action
- ☐ The Extension of Supervision as Noted Above
- ☒ The Modification of Conditions as Noted Above
- ☐ Other



The Honorable Lyle E. Strom
U.S. Senior District Judge

8/10/06

Date

Prob 49
(Rev. 12/00)

United States District Court

District of Nebraska

**Waiver of Hearing to Modify Conditions
of Supervision**

I have been advised and understand that I am entitled by law to a hearing and assistance of counsel before any unfavorable change may be made in my Conditions of Supervision. By "assistance of counsel," I understand that I have the right to be represented at the hearing by counsel of my own choosing if I am able to retain counsel. I also understand that I have the right to request the court to appoint counsel to represent me at such a hearing at no cost to myself if I am not able to retain counsel of my own choosing.

I hereby voluntarily waive my statutory right to a hearing and to assistance of counsel. I also agree to the following additional conditions:

The costs of supervision ordered by the Court be remitted due to my limited income and increasing medical expenses.

Witness: [Signature] Signed: Cindy [Signature]
U.S. Probation Officer Offender

07/13/06
Date